

Legislative Testimony
Public Health Committee
HB 6589 AA Establishing A Task Force To Study The Scope Of Practice
For Dental Hygienists
Wednesday, March 20th, 2013
Sheldon Natkin, DDS

Senator Gerratana, Representative Johnson and members of the Public Health Committee, my name is Dr. Sheldon Natkin. I have been practicing dentistry in West Haven since 1972. I also teach at Yale New Haven Hospital Dental Service and I mentor University of CT Dental students. I have been actively involved in a leadership capacity with the Connecticut State Dental Association (CSDA) since 1979. I have served on the Council on Legislation for over 20 years so I know the history of this particular legislation. I am here to testify in opposition to House Bill 6589 An Act Establishing A Task Force To Study The Scope Of Practice For Dental Hygienists.

In reviewing my notes from 2002, when I chaired a CSDA committee to revise the dental practice act, access to care was limited for people with limited means and alternative practitioners were mentioned as a solution. Our practice act review was a worthy effort to modernize an act that had its origins in the 1930's. This committee arbitrated for two years under my leadership and culminated in a review in the Public Health Department which resulted in a newer version of the dental practice act.

Since that time, there have been many bills related to scope of practice for allied dental personnel all with the stated purpose of increasing access to oral health care.

About three years ago, the CT Dental Health Partnership (formerly HUSKY) increased dental rates to bring them into the realm of the private sector. I am happy to report that with the help of the CSDA:

1. 2011 utilization rates for kids dental care of the underserved is up 20 points from 36.7% (2008) to almost 57%. National average is 42%.
2. CT along with only two other states receives a grade "A" from PEW Center oral health report.
3. There are now 1600+ dentist providers (up from some 400 or so).
4. Any child can obtain a routine dental appointment within 8 days, an emergency appointment can be had within 24 hours.
5. 95% of formerly underserved sector can now find care within 10 miles of their home.
6. Many participating dental offices contact and request more referrals from DSS.
7. 75% of the care for this cadre of patients is provided through the private sector.

This summarized information is currently available from DSS and Ct Health Foundation's "Health Issues" February 2013, a study by renowned University of CT Public Health professionals "Impact of Increased Dental Re-imbursement on Husky A insured Children 2006-2011"

In closing, it seems to me that the access issue that we have all been talking about is being well addressed. This new scope of practice proposal will complicate the dental delivery system which is working in CT. The best dental delivery system is one in which all the care givers work collaboratively in caring for our patients rather than having each interest group competing with each other.

I would like to sincerely thank-you for your time and am in hopes that you will oppose this bill and any effort to amend Advanced Dental Hygiene Practitioner language to any other bill.

Respectfully Submitted,

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